

Fax Cover Sheet

DATE: August 1, 2002 **TIME:** 6:09 PM
TO: Examiner Michael A. Willis **PHONE:** 703-305-1679
Hiraki & Associates **FAX:** 703-872-9307
FROM: Dorene M. Price **PHONE:** (631) 531-1194
Estée Lauder Companies **FAX:** (631) ~~531-1340~~
744-3594
RE: S/N 09/773,351

CC:**Number of pages including cover sheet:** 6**Message**

Please see the attached documents.

Certificate of Transmission

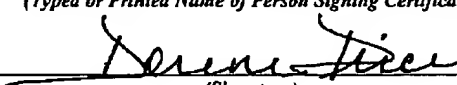
Amendment Transmittal Letter

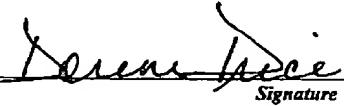
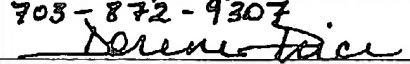
Amendment 3 pgs**ESTÉE
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GROUP 1600**OFFICIAL**

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 00.22US
Applicant(s): Maes et al.			
Serial No. 09/773,351	Filing Date January 31, 2001	Examiner Willis, M.	Group Art Unit 1617
Invention: Cholesterol Sulfate and Amino Sugar Compositions for Enhancement of Stratum Corneum Function			
FAX RECEIVED AUG 02 2002 GROUP 1600			
I hereby certify that this <u>Cert, Amend Trans, Amend (3 pgs),</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9307</u>)			
on <u>August 1, 2002</u> (Date)			
<u>DORENE M. PRICE</u> (Typed or Printed Name of Person Signing Certificate)  (Signature)			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 00.22US	
Applicant(s): Maes et al.					
Serial No. 09/773,351	Filing Date January 31, 2001	Examiner Willis, M.		Group Art Unit 1617	
Invention: Cholesterol Sulfate and Amino Sugar Compositions for Enhancement of Stratum Corneum Function					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	20 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	4 -	4 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 05-1320 A duplicate copy of this sheet is enclosed. <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ Signature			Dated: August 1, 2002		
Dorene M. Price (Reg. No. 43,018) Estee Lauder Companies 125 Pinelawn Road Melville, NY 11747 (631) 531-1194					
<div style="border: 1px solid black; padding: 5px;"> I certify that this document and fee is being deposited on August 1, 2002 with the U.S. Postal Service as first-class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231. Sent to fax number 703-872-9307.  Signature of Person Mailing Correspondence <div style="text-align: center;">DORENE M. PRICE</div> Typed or Printed Name of Person Mailing Correspondence </div>					
cc:					